An e-publication for Colorado state employees

May 2006

## State Contributions to Benefits Remain as Published

On May I, Governor Owens signed the State's budget bill, commonly referred to as the "Long Bill." The State's contributions to benefits, as recommended by DPA Executive Director Jeff Wells, remained unchanged in this bill by both the Legislature and the Governor.

Thus, the State contributions to benefits published in the April *HealthLine* and on the Employee Benefits Web site—www.colorado.gov/dpa/dhr/benefits/FY07/rates.htm—are now the official figures (shown below).

MEDICAL PLANS				
Plan	Tier	Total Premium*	State Contribution	<b>Employee Contribution</b>
PPO-1500	Employee	\$281.02	\$244.12	\$36.90
	Employee + Spouse	\$589.60	\$412.58	\$177.02
	Employee + Child(ren)	\$533.48	\$381.48	\$152.00
	Ee + Sp + Child(ren)	\$814.00	\$567.42	\$246.58
PPO-3300	Employee	\$251.20	\$244.12	\$7.08
	Employee + Spouse	\$527.10	\$412.58	\$114.52
	Employee + Child(ren)	\$476.92	\$381.48	\$95.44
	Ee + Sp + Child(ren)	\$727.70	\$567.42	\$160.28
РРО-Н	Employee	\$264.86	\$244.12	\$20.74
	Employee + Spouse	\$555.42	\$412.58	\$142.84
	Employee + Child(ren)	\$502.60	\$381.48	\$121.12
	Ee + Sp + Child(ren)	\$766.76	\$567.42	\$199.34
INO-30	Employee	\$479.80	\$244.12	\$235.68
	Employee + Spouse	\$1,008.02	\$412.58	\$595.44
	Employee + Child(ren)	\$911.98	\$381.48	\$530.50
	Ee + Sp + Child(ren)	\$1,392.18	\$567.42	\$824.76
Kaiser HMO	Employee	\$322.86	\$244.12	\$78.74
	Employee + Spouse	\$673.98	\$412.58	\$261.40
	Employee + Child(ren)	\$610.52	\$381.48	\$229.04
	Ee + Sp + Child(ren)	\$929.88	\$567.42	\$362.46
San Luis Valley HMO	Employee	\$313.12	\$244.12	\$69.00
	Employee + Spouse	\$653.78	\$412.58	\$241.20
	Employee + Child(ren)	\$591.82	\$381.48	\$210.34
	Ee + Sp + Child(ren)	\$901.50	\$567.42	\$334.08
DENTAL PLANS				
Delta BASIC	Employee	\$22.88	\$18.88	\$4.00
	Employee + Spouse	\$48.16	\$27.96	\$20.20
	Employee + Child(ren)	\$50.44	\$31.72	\$18.72
	Ee + Sp + Child(ren)	\$84.94	\$41.40	\$43.54
Delta Basic PLUS	Employee	\$31.14	\$18.88	\$12.26
	Employee + Spouse	\$68.58	\$27.96	\$40.62
	Employee + Child(ren)	\$68.58	\$31.72	\$36.86
	Ee + Sp + Child(ren)	\$121.60	\$41.40	\$80.20
Dental DR	Employee	\$27.72	\$18.88	\$8.84
	Employee + Spouse	\$58.32	\$27.96	\$30.36
	Employee + Child(ren)	\$58.32	\$31.72	\$26.60
	Ee + Sp + Child(ren)	\$105.60	\$41.40	\$64.20

<sup>\*</sup> Includes administrative fee of \$1.68 for Medical Plans and \$0.14 for Dental Plans



## YOUR WINDOW OF OPPORTUNITY IS CLOSING

**Remember—Open Enrollment closes on Friday, May 19.** If you haven't made your choices by that time, it will be too late. This is a passive Open Enrollment, meaning that if you do not want to make changes, your current, FY06 benefits will roll forward into the FY07 plan year, which starts on July 1, 2006, with the following EXCEPTIONS.

- Those currently enrolled in the INO-40 plan. This plan will be eliminated for FY07 and those who want coverage must enroll in another plan.
- Those who wish to enroll in a Flexible Spending Account (FSA) for FY07. FSAs must be elected each year and cannot roll forward into the next plan year.

To help with your enrollment decisions, you can view the overviews of the medical and dental plans as well as the Summary Plan Documents (SPDs) on our Web site, <a href="www.colorado.gov/dpa/dhr/benefits/FY07/index.htm">www.colorado.gov/dpa/dhr/benefits/FY07/index.htm</a>. The overview provides answers to most of your basic questions, while the SPD goes into greater detail.

Employees who add coverage for spouses and dependents during this Open Enrollment must provide to their benefit or human resources office verification of their relationship to the dependent (using a birth or marriage certificate or an affidavit) by May 31, 2006.

For those electing new medical coverage for FY07, new medical ID cards should arrive in the mail by July 1, 2006.

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## Diabetes Initiative to Begin July I

The State has been given the opportunity to participate in a study to determine if compliance with prescribed drug therapy for diabetes can be influenced through financial incentives, leading to better health and lower costs in the long run. Great-West Healthcare is conducting this study in partnership with the School of Pharmacy at the University of Colorado Health Science Center and GlaxoSmithKline.

## **Diabetes Initiative Facts**

- Begins July 1, 2006, and is for the FY07 Plan Year.
- For employees and their families enrolled in the INO-30, PPO-1500, or PPO-3300 plans ONLY.
- Regardless of tier (i.e., generic or brand-name drugs), all diabetic medications and supplies will cost \$10 per 30-day supply (\$20 for 90-day supply when using the mail-order service).
- Incentive DOES NOT APPLY to the PPO-H, Kaiser HMO or San Luis Valley HMO plans, as this is a formal study with tightly controlled variables.
- All data will be handled in compliance with federal HIPAA privacy regulations and only patient data that has been de-identified will be used in the analyses.

Prescription costs for diabetes medication are expected to go down for individual employees, as the insurance plans pay more towards the cost of prescriptions. The expected result is there will be a corresponding reduction in other, more expensive medical costs such as emergency room visits, as better adherence to medication therapy averts complications. If a positive return on investment can be demonstrated, the initiative may be expanded to include drugs for certain other chronic conditions.

While the immediate impact to those with diabetes will be a reduction in the amount they pay for medications, the long-term goal of the program is to encourage those with diabetes to adhere to a full program of managing their condition, including doctor's visits, diet and exercise as well as the continued use of medications. Similar diabetes initiatives with other employers such as Pitney Bowes and the City of Asheville, North Carolina, have produced dramatic, positive results in both the increased compliance of members in sticking to a regiment of treatment and reducing costs to the insurance plan and the employer. We hope to see similar, encouraging results.



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